

# TRIPURA GAZETTE



Published by Authority  
**EXTRAORDINARY ISSUE**

Agartala, Saturday, May 21, 2022 A. D. Vaisakha 31, 1944 S. E.

PART -- II Advertisements and Notices

BEFORE THE NOTARY PUBLIC  
AGARTALA : WEST TRIPURA.

ANNEXURE - I

## FORMAT OF AN AFFIDAVIT FOR TRIPURA STATE GOVERNMENT EMPLOYEE FOR CHANGE OF NAME/SURNAME

BY this deed I, the undersigned SMT. SABITA MITRA (ACHARJEE) lately called SMT. SABITA MITRA (Former name) employed as MPW (F) (Designation of the post held at the time by the Govt. servant) at Health Department (place where employed in the Department/Office of the State Government) do hereby :

1. Wholly renounce/ relinquish and abandon the use of my former name/ surname of SABITA MITRA and in place thereof do assume from this date thereof the name of SABITA MITRA (ACHARJEE) and so that I may hereafter be called known and distinguished not by my former name of SABITA MITRA but by my assumed name of SABITA MITRA (ACHARJEE).
2. For the purpose of evidencing such my determination, declare that I shall at all times hereafter in all records, deeds and writings and in all proceedings, dealings and transactions, private as well as public and upon all occasions whatsoever, use and sign the name of SABITA MITRA (ACHARJEE) as my name in place and in substitution of my former name of SABITA MITRA.
3. Expressly authorities and request all persons in general at all times hereafter to designate and address me, by such assumed name of SABITA MITRA (ACHARJEE)
4. In witness whereof I have here unto subscribed my former and adopted name of SABITA MITRA and SABITA MITRA (ACHARJEE) affixed my signature and seal this 11th day of Feb' 2022.

The contents of the Affidavit are read over and Explained to the Deponent/Deponents. The Deponent/Deponents has/have Acknowledge the contents and Has/Have signed/put the thumb impression in this Affidavit and He/She/They are identified by me.

*Manika*  
Advocate.

*Sabita Mitra (Acharjee)*

Old Signature Sabita Mitra  
New Signature Sabita Mitra (Acharjee)

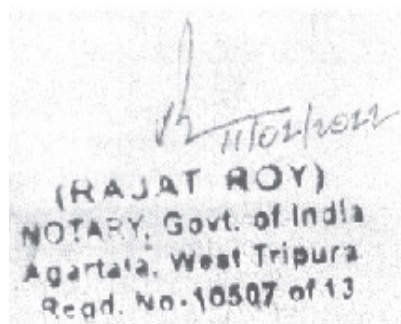
Signed and delivered by the above  
Name Sabita Mitra (Acharjee)  
Formerly Sabita Mitra in the presence of

Witness No. 1

Signature Hemanti Deb Nath  
Name Hemanti Deb Nath  
Designation Community Health Officer  
Official Address Jagaharimura HSC.  
(with Rubber Stamp) (CHO)  
Jagaharimura Sub-Dispensary  
Agartala, Tripura (W).

Witness No. 2

Signature Sankari Dey (Deb Nath)  
Name Sankari Dey (Deb Nath)  
Designation A-N-M  
Official Address Jagaharimura HSC. (H) W e  
(with Rubber Stamp) Jagaharimura Sat/Dispensary  
Agartala, Tripura West.



Mamuk SK  
Identified by me